

WSGL WEINGARTEN, SCHURGIN, GAGNEBIN & LEOVICI LLP

Intellectual Property Law
Patents • Trademarks • Copyrights

Ten Post Office Square
Boston, Massachusetts 02109
Tel. 617.542.2290 • Fax. 617.451.0313
www.wsglip.com

RECEIVED
CENTRAL FAX CENTER

SEP 28 2007

FACSIMILE COVER SHEET

DATE: September 28, 2007

TO: Examiner Ruth S. Smith
TC Art Unit: 3737

Fax No.: (571) 273 8300

FROM: Thomas O. Hoover

No. of pages transmitted
(including this page): 12

Our File: NLI-001AX

Time:

Your Ref:
Application No. 08/745,509
Filed Date: 11/12/96
Confirmation No.: 6390

Sent by: Tanya

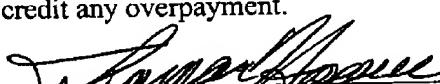
A confirmation copy of this transmission will not be mailed unless the following is checked: []
MESSAGE

PLEASE DELIVER DIRECTLY TO:
EXAMINER Smith, Tel. (571) 272 4745
TC ART UNIT NO: 3737

FOR ENTRY

Enclosed for filing please find a:
RCE Letter, Amendment Transmittal and an Amendment

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional filing fees associated with this communication or credit any overpayment.



Attorney for Applicant: Thomas O. Hoover
Registration No. 32,470

331397

THIS MESSAGE MAY CONTAIN CONFIDENTIAL OR PRIVILEGED INFORMATION INTENDED ONLY FOR THE PERSON(S) IDENTIFIED ABOVE. IF IT HAS BEEN RECEIVED AT ANY OTHER PLACE OR HAS NOT BEEN CLEARLY RECEIVED, PLEASE CALL THE ABOVE IDENTIFIED SENDING PARTY COLLECT FOR INSTRUCTIONS. DO NOT SHOW OR DISTRIBUTE THIS MESSAGE TO ANYONE OTHER THAN THE INTENDED RECIPIENT(S). THANK YOU.

Application No.: 08/745,509
 Filed: 11/12/96
 TC Art Unit: 3737
 Confirmation No.: 6390

Rev 9/06

WEINGARTEN, SCHURGIN, GAGNEBIN & LEOVICI LLP
 Ten Post Office Square
 Boston, Massachusetts 02109
 Telephone: (617) 542-2290
 Telecopier: (617) 451-0313

RECEIVED
CENTRAL FAX CENTER

SEP 28 2007

Date: September 28, 2007

Via Facsimile
COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Attorney
Docket No.: NLI-001AX

Sir:

In re application of: **Feld et al.**

Entitled: **A RAMAN ENDOSCOPE**

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

[X] This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$790.00) per §1.17(e).
 [] Enter the unentered amendment previously filed on _____ per §1.116.

[] Small Entity Status is asserted.

[X] A Petition for Extension of Time for 5 month is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$2,160.00) per §1.17.

[] In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.

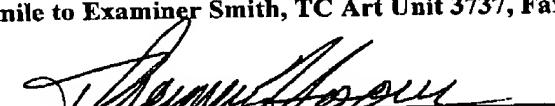
[X] Other: RCE Letter

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	1 - 3	=	x \$200.00 =	0
Total	6 - 38	=	x \$ 50.00 =	0
[] Multiple Dependent Claims (1st presentation)				+ \$360.00 =
SUBTOTAL ADDITIONAL FEE				0
Small Entity filing, divide by 2. Small Entity status must be asserted.				
TOTAL ADDITIONAL FEE				0

[X] No additional fee. [] The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$_____) for the cost of same.

[X] The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Smith, TC Art Unit 3737, Fax No. (571) 273 8300, on September 28, 2007


 Attorney of Record: Thomas O. Hoover
 Registration No.: 32,470

/trb/357593